

# 2015 Midland Youth Law Enforcement Academy



## Application/ Emergency Information Form

Participant Name: \_\_\_\_\_

Male/Female    DOB: \_\_\_\_\_    Age: \_\_\_\_\_

Allergies, medical conditions, dietary restrictions, or other special needs: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Enrollment fee for Midland County Residents: \$60, all others: \$80.

Make checks payable to Midland County Sheriff. Includes meals and t-shirts

**T-SHIRT SIZE**      S     M     L     XL     XXL   (shirts are adult sizes)

Parent/Guardian Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Numbers:    Home: \_\_\_\_\_ Work: \_\_\_\_\_

Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

In case of emergency contact: \_\_\_\_\_

First

Last Name

Relationship: \_\_\_\_\_ Phone Number: \_\_\_\_\_

As the parent/guardian of \_\_\_\_\_ I hereby consent to his/her participation in the Midland Youth Law Enforcement Academy. I hereby agree and understand the rules and regulations of the program and acknowledge receipt of same.

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

(Signature)

# 2015 Midland Youth Law Enforcement Academy



## Rules and Code of Conduct

**Mission Statement:** The Midland Youth Law Enforcement Academy is dedicated to providing an enriching and enjoyable environment for youth ages 13 to 15. This program will give the youth the opportunity to meet new friends, gain confidence and learn more about Law Enforcement as a career.

1. Each cadet shall provide a signed registration form/ Code of Conduct prior to participating in the Midland Youth Law Enforcement Academy
2. Cadets shall follow the direction of Academy Staff, Uniformed Law Enforcement, and guest speakers at all times during the Academy. Behavior that could bring discredit upon MYLEA, Midland County Sheriff's Office, Midland Police, or Academy Staff will not be tolerated
3. Should a situation occur where contact with the parent/guardian is needed, the contact numbers provided on the registration form will be used. If a medical emergency occurs, 911 will also be called in addition to the contact numbers provided.
4. The parent/guardian shall keep Academy Staff informed of necessary information regarding the participant, such as medical, health or physical concerns.
5. Cadets shall be picked up promptly at the appointed time (4:00 PM, unless otherwise notified). It is the parent/guardian's responsibility to arrange for transportation of the participant to and from each session of the Academy.
6. Midland County, the City of Midland, their employees, volunteers and officers are hereby indemnified for any loss, damage or injury to person or property or property loss, as a result of participation in the Midland Youth Law Enforcement Academy.
7. It is understood that activities of this program will include physical fitness training, simulated crime scene investigations, and exposure to a wide variety of law enforcement related topics. By registering for this program the parent/guardian hereby acknowledges and understands the rules, regulations and requirements for participation and acknowledges that the participant is able to participate in this program.
8. Failure to adhere to this Code of Conduct may result in dismissal from the Academy.

I have read and fully understand the above and agree to its terms and conditions for participation in the Midland Youth Law Enforcement Academy.

Cadet: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature)

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature)